

COMPLIANCE CHECKLIST**▷ Rehabilitation Facilities - Support Services**

The following Checklist is for plan review of hospital facilities, and is derived from the AIA/HHS Guidelines for Design and Construction of Hospital and Health Care Facilities, 2001 Edition (specific sections indicated below), appropriately modified to respond to DPH requirements for projects in Massachusetts which include Hospital Licensure Regulations 105 CMR 130.000. Applicants must verify project compliance with all the requirements of the Guidelines, Licensure Regulations & Policies when filling out this Checklist, and must include the DPH Affidavit when submitting project documents for self-certification or abbreviated review.

Other jurisdictions, regulations and codes may have additional requirements which are not included in this checklist, such as:

- NFPA 101 Life Safety Code and applicable related standards contained in the appendices of the Code.
- 708 CMR, the State Building Code.
- Joint Commission on the Accreditation of Health Care Organizations.
- CDC Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Facilities.
- Accessibility Guidelines of the Americans with Disabilities Act (ADA).
- Architectural Access Board.
- Local Authorities having jurisdiction.

Instructions:

1. The Checklist must be filled out completely with each application.
2. Each requirement line (____) of this Checklist must be filled in with one of the following codes, unless otherwise directed. If an entire Checklist section is affected by a renovation project, "E" for existing conditions may be indicated on the requirement line (____) next to the section title (e.g. E PATIENT ROOMS). If more than one space serves a given required function (e.g. patient room or exam room), two codes separated by a slash may be used (e.g. "E/X"). Clarification should be provided in that regard in the Project Narrative.

X = Requirement is met.

☒ = Check this box under selected checklist section titles or individual requirements for services that are not included in the project.

E = Functional space or area is existing and not affected by the construction project; this category does not apply if the existing space or area will serve a new or relocated service or if the facility is currently not licensed & applying for licensure.

W = Waiver requested for Guidelines, Regulation or Policy requirement that is not met (for each waiver request, complete separate waiver form & list the requirement ref. # on the affidavit).

3. Mechanical, plumbing and electrical requirements are only partially mentioned in this checklist.
4. Oxygen, vacuum & medical air outlets are identified respectively by the abbreviations "OX", "VAC" & "MA".
5. Items in *italic*, if included, refer to selected recommendations of the Appendix of the Guidelines, adopted by policy.
6. Requirements referred to as "Policies" are DPH interpretations of the AIA Guidelines or of the Regulations.

Facility Name:

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Facility Address:

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Satellite Name: (if applicable)

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Satellite Address: (if applicable)

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Project Reference:

.....

.....

Dates:

Initial:

Revisions:

DON Identification: (if applicable)

.....

Building/Floor Location:

.....

.....

ARCHITECTURAL REQUIREMENTS10.2 ☐ EVALUATION UNIT10.2.A ☐ Personnel office(s)10.2.B ☐ Examination Room(s)☐ min. 140 sf clear floor area☐ min. dimension 10'-0"☐ work counter☐ storage☐ charting surface10.2.D ☐ Specimen collection☐ work counter☐ storage cabinets☐ urine & feces collection toilet room☐ blood collection station☐ patient seating space☐ work counter☐ storage cabinets7.12 ☐ Laboratory☐ check if service not included in project☐ operated by **or** ☐ independently operated &
the hospital licensed (if so, do not
complete 7.12 subsections)7.12.A ☐ Laboratory work counters☐ space for appropriate equipment7.12.B ☐ Refrigerated blood storage for transfusions7.12.D ☐ Storage facilities, including refrigeration7.12.F ☐ Chemical safety provisions, including☐ emergency shower☐ emergency eyewash☐ storage for flammable liquids7.12.H ☐ Radioactive materials procedures☐ check if service not included in project☐ provisions for storage & disposal of radioactive
materials7.12.I ☐ Administrative areas (offices, clerical/filing areas)7.12.J ☐ Staff facilities (may be shared with other depts.)☐ lounge☐ lockers☐ toilet room**MECHANICAL/PLUMBING/
ELECTRICAL REQUIREMENTS**☐ Handwashing station☐ Vent. min. 6 air ch./hr☐ Sink☐ Handwashing station☐ Vent. min. 10 air ch./hr (exhaust)☐ Handwashing station☐ Vent. min. 6 air ch./hr (exhaust)☐ Gas, vacuum, air & elec. services☐ Sinks equipped for handwashing☐ Temperature monitoring & alarm☐ Autoclave or elec. oven for
terminal sterilization of
contaminated specimens before
transport (7.12.G)☐ Ventilation provided as per 7.31.D1☐ Fume hoods provided as per

7.31.D13

☐ Handwashing station☐ Vent. min. 10 air ch./hr (exhaust)

ARCHITECTURAL REQUIREMENTS**MECHANICAL/PLUMBING/
ELECTRICAL REQUIREMENTS**

- 10.3 ___ PSYCHOLOGICAL SERVICES UNIT
 ___ ☐ check if service not included in project
 ___ Offices & work space for testing, evaluation & counseling
- 10.4 ___ SOCIAL SERVICES UNIT
 ___ Offices for private interviewing & counseling
- 10.5 ___ VOCATIONAL SERVICES UNIT
 ___ ☐ check if service not included in project
 ___ Offices & work space for vocational training, counseling & placement
- 10.6 ___ PATIENT DINING, RECREATION & DAY SPACES
 (May be separate or adjoining)
- 10.6.A ___ Inpatient program:
 ___ min. 55 sf per bed
- 10.6.B ___ Outpatients program:
 ___ ☐ check if service not included in project
 dining provided **or** dining not provided
 ___ min. 55 sf per ___ min. 35 sf per outpatient
 outpatient slot slot
- 10.6.C ___ Storage for recreational equipment & supplies.
- 10.7 ___ DIETARY DEPARTMENT
- A1 ___ Control station for receiving food & supplies.
- A2 ___ Food preparation facilities for conventional system or ___ Handwashing station
 convenience system
- A4 ___ Tray assembly & distribution area
- A5 ___ Separate dining space for staff
- A6 ___ Warewashing space: ___ Handwashing station
 ___ separate from food preparation & serving area
 ___ commercial dishwashing equipment
 ___ space for receiving, scraping, sorting & stacking soiled ware
 ___ space for transferring clean tableware to use areas
- A7 ___ Pot washing area & equipment
- A8 ___ Storage for cans, carts, tray conveyors
- A9 ___ Waste storage room
 ___ easily accessible from outside
- A10 ___ Office(s) or desk space(s) for dietician(s) or service manager.
- A11 ___ Toilets for dietary staff ___ Handwashing station
 ___ Vent. min. 10 air ch./hr (exhaust)
- A12 ___ Housekeeping room
 ___ for exclusive use of dietary department
 ___ storage for equipment & supplies
- A13 ___ Self dispensing ice making facility
 ___ easily cleanable
 ___ convenient to dietary facilities

ARCHITECTURAL REQUIREMENTS**MECHANICAL/PLUMBING/
ELECTRICAL REQUIREMENTS**

- 10.8 ☐ PERSONAL CARE UNIT FOR INPATIENTS
☐ Separate room with appropriate fixtures & equip. for patient grooming (ADL room may serve this function)
- 10.9 ☐ ACTIVITIES FOR DAILY LIVING (ADL) UNIT
☐ ADL bedroom
☐ ADL bathroom
☐ equipment is functional
☐ ADL kitchen
☐ equipment is functional
☐ Training stairs
- 10.10 ☐ ADMINISTRATION & PUBLIC AREAS
- 10.10.A ☐ Entrance
☐ grade-level entrance
☐ sheltered from weather
☐ wheelchair accessible
- 10.10.B ☐ Lobby
☐ wheelchair storage space
☐ reception & information counter/desk
☐ waiting space(s)
☐ public toilet facilities
☐ public telephone(s)
☐ drinking fountain(s)
- 10.10.D ☐ Offices for administrative & professional staffs
☐ medical records
- 10.10.E ☐ Multipurpose rooms for meetings & health education
- 10.10.F ☐ Patient personal effects storage
- 10.10.G ☐ General Storage
☐ office supplies
☐ sterile supplies
☐ pharmaceutical supplies
☐ other orthopedic supplies
☐ housekeeping supplies & equip.
- 10.11 ☐ ENGINEERING SERVICES & EQUIPMENT AREA
- 10.11.A ☐ Rooms for boilers, mechanical & electrical equipment
- 10.11.B ☐ Storage rooms for building maintenance supplies & yard equipment
- 10.11.C ☐ Space & facilities for the sanitary storage & disposal of waste
- ☐ Vent. min. 10 air ch./hr (exhaust)
☐ Vent. min. 10 air ch./hr (exhaust)
☐ Vent. min. 10 air ch./hr (exhaust)
☐ Handwashing station
☐ Vent. min. 10 air ch./hr (exhaust)
☐ negative pressure
☐ air exhausted to outdoors

ARCHITECTURAL REQUIREMENTS10.12 LINEN SERVICES

- A2 ☐ Separate room for receiving & holding soiled linen until ready for pickup or processing
☐ cart washing facilities
- A4/B2 ☐ Central clean linen storage & issuing room(s)
- 10.12.B/
A1/A3/
A5 ☐ Outside laundry processing **or** ☐ On-site laundry processing room
- ☐ service entrance protected from inclement weather
☐ control station for pickup & receiving
- ☐ commercial equipt. w/ adequate capacity
☐ storage for laundry supplies
- ☐ Housekeeping room
☐ storage space for housekeeping equipt. & supplies

10.17 PHYSICAL THERAPY UNIT

- ☐ check if service not included in project
- 10.17.A ☐ Office space
- 10.17.B ☐ Waiting space
- 10.17.C/
7.13.C1 ☐ Individual treatment areas
☐ check if service not included in project
☐ privacy curtains
☐ min. 70 sf
- ☐ Treatment rooms
☐ at least one individual treatment room
☐ min. 80 sf
- ☐ Area for soiled linen holding
- 10.17.D ☐ Exercise area
- 10.17.E ☐ Clean linen & towel storage
☐ Storage for equipment & supplies
- 10.17.F ☐ Patient dressing areas & lockers
☐ handicapped accessible
☐ Patient toilets
☐ Patient showers
☐ handicapped accessible
- 10.17.G ☐ Wheelchair & stretcher storage

10.18 OCCUPATIONAL THERAPY UNIT

- ☐ check if service not included in project
 (asterisked functions may be shared with PT unit)
- 10.18.A ☐ Office space*
- 10.18.B ☐ Waiting space*
- 10.18.C ☐ Activity area
☐ waste products holding
- 10.18.D ☐ Storage for equipment & supplies
- 10.18.E ☐ Patient toilets*

**MECHANICAL/PLUMBING/
ELECTRICAL REQUIREMENTS**

- ☐ Handwashing station
☐ Vent. min. 10 air ch./hr
☐ negative pressure
☐ air exhausted to outdoors
- ☐ Vent. min. 2 air ch./hr
- ☐ Handwashing station
☐ Vent. min. 10 air ch./hr
☐ negative pressure
☐ air exhausted to outdoors
- ☐ Floor receptor or service sink
☐ Vent. min. 10 air ch./hr (exhaust)
- ☐ Handwashing stations
- ☐ Handwashing station
☐ Vent. min. 10 air ch./hr (exhaust)
- ☐ Handwashing station
☐ Vent. min. 10 air ch./hr (exhaust)
- ☐ Handwashing station
☐ Vent. min. 10 air ch./hr (exhaust)
- ☐ Handwashing station
☐ Vent. min. 10 air ch./hr (exhaust)

ARCHITECTURAL REQUIREMENTS

- 10.19 — PROSTHETICS & ORTHOTICS UNIT
☐ check if service not included in project
- 10.19.A — Workspace for technicians
- 10.19.B — Space for evaluation & fitting
 — provisions for privacy
- 10.19.C — Storage for equipment & supplies
- 10.20 — SPEECH & HEARING UNIT
☐ check if service not included in project
- 10.20.A — Therapists office(s)
- 10.20.B — Evaluation & treatment space
- 10.20.C — Storage for equipment & supplies
- 10.21 — DENTAL UNIT
☐ check if service not included in project
- 10.21.A — Operatory
- 10.21.B — Laboratory & film processing facilities
- 10.22 — IMAGING SUITE
☐ check if service not included in project
 Complete separate checklist (IP9)
- 10.23 — PHARMACY UNIT
☐ check if service not included in project
- 10.23.A — Dispensing area
- 10.23.B — Editing / order review area
- 10.23.C — Compounding area
- 10.23.D — Administrative areas
- 10.23.E — Storage areas
- 10.23.F — Drug information area
- 10.23.G — Packaging area
- 10.23.H — Quality control area

**MECHANICAL/PLUMBING/
ELECTRICAL REQUIREMENTS**

- Handwashing station
- Vent. min. 10 air ch./hr (exhaust)

- Handwashing station

GENERAL STANDARDS**Details and Finishes**

- Inpatient corridors
- | | |
|---|---|
| <p>▸ New/Extensive Construction</p> <p>___ min. corridor width 8'-0" (NFPA 101)</p> | <p>▸ Limited Renovations</p> <p>___ corridor width unchanged or increased</p> |
|---|---|
- Staff corridors
- ___ min. corridor width 5'-0" (7.28.A2)
- ___ Fixed & portable equipment recessed does not reduce required corridor width (7.28.A3)
- ___ Work alcoves include standing space that does not interfere with corridor width
- ☐ check if function not included in project
- Doors (10.24.A3-A6):
- ___ doors to rooms used for stretchers or wheelchairs min. 2'-10" wide
- ___ all doors are swing-type
- ___ outswinging/double-acting doors for toilet room
- ___ doors do not swing into corridor
- ___ Operable windows (7.28.A9-A10):
- ☐ check if all windows are fixed
- ___ window operation prohibits escape or suicide
- ___ insect screens
- ___ Glazing (7.28.A11):
- ___ safety glazing or no glazing under 60" AFF & within 12" of door jamb
- ___ safety glazing or no glazing in exercise rooms
- ___ safety glazing (or curtains) in shower & bath enclosures
- ___ Linen & refuse chutes min. int. dim. 2'-0" (7.28.A12)
- ☐ check if service not included in project
- ___ Thresholds & expansion joints flush with floor surface
- ___ Grab bars in all patient toilets & bathing facilities (10.24.A13)
- ___ 1½" wall clearance
- ___ 250 lb. capacity
- ___ Handrails on both sides of corridors (10.24.A15-A16):
- ___ 1½" wall clearance
- ___ top of handrail standard height 32" AFF
- ___ handrail returns meet wall at each end
- ___ Patient handwashing sinks are handicapped type (Policy)
- ___ Handwashing sinks anchored to withstand 250 lbs.
- Vertical clearances (10.24.A22):
- ___ ceiling height min. 7'-10", except:
- ___ 7'-8" in corridors, toilet rooms, storage rooms
- ___ sufficient for ceiling mounted equipment
- min. clearance under suspended pipes/tracks:
- ___ 7'-0" AFF in bed/stretcher traffic areas
- ___ 6'-8" AFF in other areas
- ___ Activity rooms not located over patient bed areas

Floors (10.24.B2):

- ___ floors easily cleanable & wear-resistant
- ___ non-slip floors in wet areas
- ___ wet cleaned flooring resists detergents

Walls (10.24.B4):

- ___ wall finishes are washable
- ___ smooth/water-resist. finishes at plumbing fixtures
- ___ Acoustical ceilings in patient corridors, nurses station, day rooms, act. rooms, dining areas, waiting areas (10.24.B7)

Elevators (10.26.A)

- ☐ check if service not included in project
- (only if all patient facilities are located on entrance floor)
- Min. interior elevator dimensions
- | | |
|---|---|
| <p>▸ Extensive Construction</p> <p>___ 5'-8" x 9'-0" (10.30.B1)</p> | <p>▸ Limited Renovations</p> <p>___ 5'-0" x 7'-6"</p> |
|---|---|
- ___ Elevator doors at least 3'-8" wide

Mechanical (10.31.D)

- ___ Mech. ventilation provided per Table 7.2
- ___ Exhaust fans located at discharge end
- ___ Fresh air intakes located at least 25 ft from exhaust outlet or other source of noxious fumes
- ___ Contaminated exhaust outlets located above roof
- ___ Ventilation openings at least 3" above floor
- ___ Central HVAC system filters provided per Table 7.3

Plumbing (10.31.E)

- Handwashing station equipment
- ___ handwashing sink
- ___ hot & cold water
- ___ single lever or wrist blades faucet
- ___ soap dispenser
- ___ hand drying facilities
- Sink controls (10.31.E1):
- ___ hands-free controls at all handwashing sinks
- ___ blade handles max. 4½" long
- ___ blade handles at clinical sinks min 6" long
- ___ Non-slip walking surface at tubs & showers

Electrical (10.32)

- ___ All occupied building areas shall have artificial lighting (10.32.D3)
- ___ Duplex, grounded receptacles max. 50 feet in corridors, max. 25 feet from end wall (10.32.E2)
- ___ Emergency power (10.32.H)
- ___ emergency power provided to all essential services complies with NFPA 99, NFPA 101 & NFPA 110
- ___ emergency power source provided with fuel capacity for continuous 24-hour operation